

**INSPECTION, TESTING, AND CERTIFICATION OF WORK**  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: WV-002

Date of Visit: 3-13-18

Contractor Personnel on Site:

4. Casto 4. \_\_\_\_\_  
5. \_\_\_\_\_ 5. \_\_\_\_\_  
6. \_\_\_\_\_ 6. \_\_\_\_\_

**Work Performed:**

**Inspection, Testing, and Certification**

5. 3 Backflow Preventer tests  
6. \_\_\_\_\_  
7. \_\_\_\_\_  
8. \_\_\_\_\_

**CERTIFICATION OF WORK**

To be signed by the Contractor:

Print Name: James Stackler Date: 3-13-18

Signed: James Stackler

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: John Z Date: \_\_\_\_\_

Signed: \_\_\_\_\_

E-Mail: \_\_\_\_\_